

Please type a plus sign (+) inside this box

PTO/SB/05 (08-01)

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. M4065.0374/P374

First Named Inventor Jerry M. Brooks

Title SEMICONDUCTOR ASSEMBLY WITHOUT

Express Mail Label No.

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1.	<input checked="" type="checkbox"/>	Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i>
2.	<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27
3.	<input checked="" type="checkbox"/>	Specification [Total Pages] 21
<i>(preferred arrangement set forth below)</i>		
<ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure 		
4.	<input checked="" type="checkbox"/>	Drawing(s) (35 U.S.C. 113) [Total Sheets] 5
5.	Oath or Declaration [Total Pages] []	
a.	<input checked="" type="checkbox"/>	Newly executed (original or copy)
b.	<input type="checkbox"/>	Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/division with Box 18 completed)</i>
i.	<input type="checkbox"/>	DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6.	<input type="checkbox"/>	Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (*Appendix*)

8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

a. Computer Readable Form (CRF)

b. Specification Sequence Listing on:

i. CD-ROM or CD-R (2 copies); or ii. paper

c. Statements verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

9. Assignment Papers (cover sheet & document(s))

10. 37 CFR 3.73(b) Statement
(when there is an assignee) Power of Attorney

11. English Translation Document *(if applicable)*

12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations

13. Preliminary Amendment

14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)

16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i).
Applicant must attach form PTO/SB/35 or its equivalent.

17. Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76

Continuation Divisional Continuation-in-part (CIP) of prior application No.:

Prior application information: Examiner _____ Group / Art Unit: _____
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.

18 CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label Correspondence address below

Name	DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Thomas J. D'Amico			
Address	2101 L Street NW			
City	Washington	State		Zip Code 20037-1526
Country		Telephone	(202) 785-9700	Fax (202) 887-0689
Name (Print/Type)	Thomas J. D'Amico		Registration No. (Attorney/Agent)	28,371
Signature			Date	January 17, 2001

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 1,412.00)

Complete if Known

Application Number	Not Yet Assigned
Filing Date	
First Named Inventor	Jerry M. Brooks
Examiner Name	Not Yet Assigned
Group Art Unit	N/A
Attorney Docket No.	M4065.0374/P374

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 04-1073

Deposit Account Name

 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Applicant claims small entity status. See 37 CFR 1.272. Payment Enclosed Check Credit Card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	390	216	195
117	890	217	445
118	1,390	218	695
128	1,890	228	945
119	310	219	155
120	310	220	155
121	270	221	135
138	1,510	138	1,510
140	110	240	55
141	1,240	241	620
142	1,240	242	620
143	440	243	220
144	600	244	300
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	710	246	355
149	710	249	355
179	710	279	355
169	900	169	900
Other fee (specify) _____		SUBTOTAL (3) (\$)	40.00

*Reduced by Basic Filing Fee Paid

SUBTOTAL (2) (\$ 662.00)

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Complete (if applicable)

Name (print/type)	Thomas J. D'Amico	Registration No. (Attorney/Agent)	28,371	Telephone	(202) 828-2232
Signature				Date	January 17, 2001



01/17/01